

#### IV. PIP Matrix

##### Part A: Strategy Measurement Plan and Quarterly Status Report

Primary Strategy I: Improving Pathways to Permanence			Applicable CFSR Outcomes or Systemic Factors: P1, P2, Case Review, Foster Care Licensing			
Goal Ia: Improve Case Planning and Review			Applicable CFSR Items: 6, 7, 10, 12, 13, 14, 15, 16, 25, 29			
Action Steps/Benchmarks	Person Responsible	Evidence of Completion	Qtr Due	Qtr Done	Quarterly Update	CB comments
<b>Action Step 1:</b> Through revision of the Child Welfare (CW) Ongoing Services Standards, improve policy to support an integrated case planning approach to strengthen safety, permanency, and well-being outcomes for children and their families.						
<b>Operational benchmarks (statewide):</b>						
<b>Ia.1.1</b> Rewrite the CW Ongoing Services Standards to support integrated case planning, improve practice for preserving connections, and support better use of concurrent planning, trial reunification, and Other Planned Living Arrangements (OPPLA).	J. Brom	Draft of CW Ongoing Services Standards	Q1	Q1	Q1 - Case Process committee met monthly to review and revise current draft of Standards. TA request was completed and departmental workgroup met with National Resource Center for Permanency and Family Connections for initial onsite consultation for concurrent planning. Current draft with most recent revisions from committee attached with Q1 quarterly report.	<b>Quarter 1 CB response:</b> Benchmark complete. CB and DCF had extensive discussion during the onsite visit of the importance of the final ongoing service standards and the developing practice model informing one another. CB feedback included suggestions that DCF strengthen the substantive guidance in the standards around permanency planning, including the areas of concurrent planning and trial reunification, mirroring some of the good work present in the Case Transition section. DCF indicated that the Ongoing Standards were still in draft form and future modifications were underway. CB looks forward to reviewing subsequent iterations of the Ongoing Standards. <b>Quarter 2 CB response:</b> The revised version of the Ongoing Standards was submitted as requested.
<b>Ia.1.2</b> Issue draft of the CW Ongoing Services Standards for review and comments. Consult with external stakeholders for policy change recommendations.	J. Brom	Summary report of recommendations received	Q3	Q3	Q3 - CW Ongoing Services Standards draft released to stakeholders via informational memo July 2011. Outreach and Feedback sessions conducted at sites throughout state from July 2011 through October 2011. Targeted feedback questionnaire provided to assist stakeholders in reviewing draft. During next three PIP quarters, feedback from sessions along with any additional feedback will be utilized by committee to further refine CW Ongoing Services Standards and guide integrated case plan design. Summary of feedback session attendance as well as summary report of recommendations received attached with Q3 quarterly report.	<b>Quarter 3 CB response:</b> Benchmark complete. During the Q3 meeting, CB and DCF had some productive conversation about how the new CW Ongoing Services Standards are being received around the State. CB raised the question about the inclusion of Subsidized Guardianship in the Ongoing Standards and we were pleased to learn that the related material is in development and will be included in the final version.



<b>Ia.1.3</b> Develop curriculum and training requirements to be put in place upon issuance of the updated CW Ongoing Services Standards.	J. Brom	Finalized curriculum; training requirements; training schedule	Q6			
<b>Ia.1.4</b> Issue CW Ongoing Services Standards.	J. Brom	Quarterly report with summary of policy issuance	Q8			
<b>Ia.1.5</b> Through the use of on-site consultants, provide field training and ongoing technical assistance to implement practice change statewide at the ground level in accordance with the new Standards and integrated case planning policy. (To reach all 72 counties with regional training and 25% of counties - including Milwaukee - with TA consultation.)	J. Brom, C. Sieck	Summary report of Ongoing field training and on-site TA initiated	Q8			
<b>Ia.1.6</b> Modify eWiSACWIS to support CW Ongoing Services Standards and integrated case plan practice documentation.	J. Brom, eWiSACWIS team	Summary report of eW changes completed (Current Status: requirements completed)	Q8			
<b>Action Step 2:</b> Make legislative changes necessary to improve case planning and review, including the improved use of concurrent planning, trial reunification, and OPPLA.						
<b>Operational benchmarks (statewide):</b>						
<b>Ia.2.1</b> Conduct initial research and preliminary steps to identify potential legislative changes needed to improve case planning.	J. Majerus	Summary report of initial research and potential statutory changes identified	Q1	Q1	Q1 - Potential statutory changes reviewed. Timeline for input from Case Process committee, Permanency Workgroup, and Out of Home Care Committee established. Potential legislative proposals attached with Q1 quarterly report.	<b>Quarter 1 CB response:</b> Benchmark <u>incomplete</u> . The EOC submitted to date reflects initial research and preliminary steps towards pursuing legislative approvals related to trial reunification, concurrent planning, integrated case plan, and OPPLA, but actual written legislative proposals were not submitted. CB and DCF decided to amend the PIP to include an action step reflecting this preliminary work and renegotiate the date of the original benchmark Ia.2.1.to a later quarter due, TBD by DCF, but early enough to ensure the remainder of the benchmarks are completed within the 2 year PIP implementation period. The Q2 report, submitted by DCF, will reflect the necessary changes to the matrix. <b>Quarter 2 CB response:</b> DCF made the necessary updates to the matrix. The revised benchmark 1a.2.1 is determined to be <u>complete</u> . The quarter due date for the newly added benchmark 1a.2.2 is acceptable, and the rest of the action step has been adjusted appropriately as needed.
<b>Ia.2.2</b> Review and identify needed statutory changes for case planning review (include input from stakeholder groups).	J. Majerus	Written legislative proposals	Q6	Q5	Q5 - Final drafting instructions for Senate Bill 502 and Assembly Bill 599 developed based on stakeholder input. Summary of development process attached with Q5 quarterly report.	



Ia.2.3 Identify and consult with potential legislative sponsors, assist in drafting bills, attend legislative hearings, and support passage of bills through ongoing consultation.	J. Majerus	Legislative bills and/or summary of legislative consultations	Q6	Q5	2011 Wisconsin Act 181 passed legislature March 19, 2012, and signed into law April 2, 2012. Act includes statutory changes to support improved permanency planning through use of concurrent planning, trial reunification, and improved requirements for OPPLA. Changes to law take effect November 1, 2012 to coincide with implementation of revised Ongoing Services Standards. Link to legislation and summary of legislative changes under the Act attached with Q5 quarterly report.	
Ia.2.4 Issue policy and provide regional and on-site training to implement new legislative requirements for concurrent planning, trial reunification, and OPPLA.	J. Majerus	Summary of policy issued and regional trainings	Q8			
<b>Action Step 3:</b> Collaborate with the Children's Court Improvement Program (CCIP) to create the <i>Permanency Workgroup</i> as a subcommittee of the <i>WI Commission on Children, Families and the Courts</i> , to provide recommendations for improving the case review system processes.						
<b>Operational benchmarks (statewide):</b>						
Ia.3.1 Collaborate with CCIP to identify the members of the <i>Permanency Workgroup</i> .	R. Hermes, M. Jensen Goodwin	Summary report of workgroup members identified; Meeting schedule	Q1	Q1	Q1 - Collaborated with CCIP to establish workgroup membership and meeting schedule. Membership list and meeting schedule attached with Q1 quarterly report.	<b>Quarter 1 CB response:</b> Benchmark complete.
Ia.3.2 <i>Permanency Workgroup</i> identifies potential for changes in policy, law, and practice that will increase consistency in filing timely TPR petitions in accordance with ASFA, standardize agency and court practice in notifying caregivers of hearings, improve the quality of permanency plan hearings, and clarify the concepts of trial reunification and concurrent planning to ensure legal and judicial systems are able to fully implement those policies.	R. Hermes, M. Jensen Goodwin	Quarterly report with summary of meetings	Q4	Q4	Q4 - Permanency Workgroup met quarterly to review policy, law, and practice, and to make recommendations for needed change to improve permanency outcomes. Summary of meetings attached with Q4 quarterly report.	<b>Quarter 4 CB response:</b> Benchmark complete. CB appreciated the time spent with the Permanency Workgroup during the onsite visit 3/23/12.
Ia.3.3 Through quarters 2 through 8, <i>Permanency Workgroup</i> provides ongoing consultation to DCF with recommendations regarding case review system policy, law, and practice improvements.	R. Hermes, M. Jensen Goodwin	Summary report of recommendations received	Q5	Q5	Q5 - Summary report of Workgroup's recommendations to date attached with Q5 quarterly report.	
Ia.3.4 DCF, with input from the <i>Permanency Workgroup</i> , will produce resource materials to guide practice and assist in training.	R. Hermes	Resource materials	Q7			
Ia.3.5 DCF implements use of practice resource materials in child welfare on-site and on-line training. (To reach all 72 counties with regional and on-line training and 25% of counties - including Milwaukee - with TA consultation.)	R. Hermes	Summary of trainings and on-site TA where resource materials used	Q8			
<b>Goal Ib: Enhanced Utilization of Permanency Goals</b>			<b>Applicable CFSR Items: 7, 8, 9, 10</b>			
<b>Action Steps/Benchmarks</b>	<b>Person Responsible</b>	<b>Evidence of Completion</b>	<b>Qtr Due</b>	<b>Qtr Done</b>	<b>Quarterly Update</b>	
<b>Action Step 1:</b> Continue implementing permanency consultations to expedite permanency for children and youth in out-of-home care in the Bureau of Milwaukee Child Welfare (BMCW).						
<b>Operational benchmarks (targeted):</b>						



Ib.1.1 BMCW permanency consultation workgroup meets to discuss identified systemic barriers and amend program policy to support process.	D. Franke	Summary analysis of policy amendments	Q4	Q4	Q4 - Meetings to oversee process and make needed changes held. Summary report attached with Q4 quarterly report.	<b>Quarter 4 CB response:</b> Benchmark complete. We appreciated the time spent with BMCW stakeholders during the onsite meeting 3/22/12 and the opportunity to learn firsthand about the BMCW redesign. We also appreciated the clarifications provided about the differences between the Permanency Consultations, the Permanency Consultants, and the Permanency Roundtables, as well as the additional information provided about the permanency planning processes underway in Milwaukee.
Ib.1.2 Oversee documentation, tracking of consultations and follow-up on Permanency Action Plans and make adjustments for improved implementation, as needed.	D. Franke	Monthly and quarterly reports	Q4	Q4	Q4 - Data reports showing oversight and tracking attached with Q4 quarterly report.	<b>Quarter 4 CB response:</b> Benchmark complete.
Ib.1.3 Continue project monitoring and management.	D. Franke	Summary of project monitoring	Q7			
<b>Action Step 2:</b> Implement Casey Permanency Roundtables (or a modified version) statewide.						
<b>Operational benchmarks (statewide):</b>						
Ib.2.1 Develop a Wisconsin Permanency Roundtable (or modified version) protocol and training for statewide implementation.	P. Lancour	Protocol; Summary report of training implementation plan	Q1	Q1	Q1 - In collaboration with Casey Family Foundation, roundtables conducted in Dane and Brown counties. Department staff attended training and observation in Georgia, and began development of Values and Skills training for Wisconsin. Protocol and summary report of training implementation plan attached to Q1 quarterly report.	<b>Quarter 1 CB response:</b> Benchmark complete. DCF agreed to share with CB the Permanency Roundtable Process Evaluation report, completed 3-2011, so CB could be better informed of the implementation strengths and challenges occurring with the pilot project. <b>Quarter 2 CB response:</b> The Permanency Roundtable Process Evaluation report was submitted as requested.
Ib.2.2 Modify eWiSACWIS to provide documentation and templates needed for implementation.	P. Lancour, eWiSACWIS team	Summary report of eWiSACWIS modifications (Current Status: Design beginning for June 2011 production)	Q4	Q4	Q4 - eWiSACWIS modifications made July 5, 2011. Summary of modifications attached to Q4 quarterly report.	<b>Quarter 4 CB response:</b> DCF clarified onsite that the eWiSACWIS modifications are up to date. Benchmark complete.
Ib.2.3 Through use of on-site permanency consultants, provide training and ongoing technical assistance to implement Wisconsin Permanency Roundtable protocol in 44 counties, which includes 77% of the children in out-of-home care in the Balance of the State (outside Milwaukee County). Full statewide implementation will be completed in June, 2013. Following the PIP implementation period, implementation progress and completion will be included in the state's Annual Progress and Services Report.	P. Lancour	Quarterly report with summary of permanency roundtables/consultations held	Q8			
Ib.2.4 Evaluate effectiveness through monitoring timeliness to permanency.	P. Lancour	Summary of evaluations	Q8			
<b>Action Step 3:</b> Expand the Subsidized Guardianship (SG) program statewide.						
<b>Operational benchmarks (statewide):</b>						



Ib.3.1 Obtain necessary statutory authority to fund expansion of the SG program statewide.	S. Obershaw, J. Majerus	Statutory authority provided in law	Q2	Q2	Q2 - Statutory authority for statewide SG program enacted by 2011 Wisconsin Act 32 on June 26, 2011. Excerpt from Act 32 with statutory changes relevant to SG attached with Q2 quarterly report.	<b>Quarter 2 CB response:</b> Benchmark complete.
Ib.3.2 Develop training, and develop and issue policy for SG expansion.	S. Obershaw, C. Sieck	Summary report of policy issued and training implementation plan	Q3	Q3	<p>Q2 - Policy will be finalized and published on August 1, 2011. Training currently being finalized and will be provided for BMCW staff on August 8th and 9th, 2011. Statewide webcast training will be held end of August, and on-site regional trainings for CW supervisors will be held September and October.</p> <p>Q3 - Policy for statewide implementation published August 2, 2011. Training sessions for BMCW staff held August 8th and 9th. Implementation plan for statewide training completed including on-site regional trainings held in September, and live on-line training held October 11th. Regional on-site trainings to continue through February of 2012, and collaboration with CCIP underway to include SG in multi-disciplinary court district trainings (including judges, court personnell and agency staff) in fall of 2012. Policy available online:  <a href="http://dcf.wisconsin.gov/memos/num_memos/DS P/2011/2011-09.pdf">http://dcf.wisconsin.gov/memos/num_memos/DS P/2011/2011-09.pdf</a></p>	<p><b>Quarter 2 CB response:</b> While this benchmark is currently still <u>incomplete</u>, SG expansion activities are progressing nicely in Wisconsin. CB supports the minor extension to Q3 for benchmark 1b.3.2 and DCF should update the the matrix accordingly with the Q3 submission.</p> <p><b>Quarter 3 CB response:</b> Benchmark complete.</p>
Ib.3.3 Develop and implement eWiSACWIS documentation and templates needed.	S. Obershaw, eWiSACWIS team	Summary report of eWiSACWIS changes made (Current Status: Initial requirements complete and to be scheduled for June 2011 production)	Q5	Q5	Q2 - Developed all forms currently required. Three separate releases will occur to fully incorporate documentation requirements of program into eWiSACWIS. All forms currently required will be available with issued policy and required for documentation. Forms and operations currently available in eWiSACWIS include: Ability to open Subsidized Guardianship case, Subsidized Guardianship Agreement form, Notice of Decision on Subsidized Guardianship Eligibility Status After Age 18, and Decision on Subsidized Guardianship Eligibility Status After Age 18. October release will include: Automation of the rate setting process, scanning capacity for required documentation, and Permanency Plan Subsidized Guardianship Addendum. February release will include: Annual Review Questionnaire; amendment process and related forms.	<b>Quarter 2 CB response:</b> Benchmark currently <u>incomplete</u> . CB and DCF had an extensive conversation during the 9.20.11 onsite meeting about the progress with the eWiSACWIS changes and their impact on SG implementation. DCF provided clarification to CB that front line workers and supervisors will still be able proceed with SG cases in practice despite the delays in the eWiSACWIS components. The separate eWiSACWIS releases will occur as needed over the next 5 months and this benchmark is on track for completion during Q5. DCF should update the quarter due as needed with the Q3 submission for benchmark Ib.3.3.



					Q5 - February release of eWiSACWIS updates completed to include all documentation and templates necessary for Subsidized Guardianship implementation (previously some forms only available on website). Changes include documentation of subsidized guardianship eligibility tracking and annual monitoring. Quick Reference Guide with summary of updates attached with Q5 quarterly report.	
Ib.3.4 Implement SG policy in Milwaukee County through training and continued technical assistance.	S. Obershaw	Summary analysis of use of SG in Milwaukee County	Q4	Q4	<p>Q2 - Per IV-E State Plan amendment, SG will still operate under Waiver until July 31, 2011. Procedures and training to implement new statewide program in Milwaukee County underway.</p> <p>Q3 - Transition workgroup met during three quarters to identify questions and finalize procedures for Milwaukee transition from waiver to statewide program. Procedures finalized end of July. Training sessions for BMCW staff held August 8th and 9th. As of Q3, all control group cases with SG as perm goal on track for transfer of guardianship and SG order. State Plan amendment submitted September 30th.</p> <p>Q4 - Updated data attached to Q4 quarterly report.</p>	<p><b>Quarter 2 CB response:</b> Benchmark currently <u>incomplete</u>. Due to the waiver extension, CB approves the quarter due extension to Q3 for benchmark 1b.3.4.</p> <p><b>Quarter 3 CB response:</b> Benchmark <u>incomplete</u>. CB requested some additional, more specific data and analysis reflecting actual usage of SG in Milwaukee County. In partial fulfillment of this request, DCF submitted the Post-Permanency Outcomes Report from the now concluded SG title IV-E waiver demonstration project. DCF also agreed to submit a summary data report of SG usage in Milwaukee County through the remainder of the calendar year with the Q4 PIP report. Therefore, the quarter due for this benchmark has been extended to Q4.</p> <p><b>Quarter 4 CB response:</b> Benchmark complete.</p>
Ib.3.5 Implement SG policy statewide through training and continued technical assistance.	S. Obershaw	Summary analysis of use of SG statewide	Q4	Q4	<p>Q3 - SG policy and statutory authority implemented statewide. SG program discussed with and supported for implementation by various statewide stakeholders including Permanency Workgroup, Out of Home Care Committee, Case Process Committee, and Indian Child Welfare Directors. Statewide program fully implemented in Milwaukee and preliminary data reports indicate use in other counties. Requests for consultation to state staff also indicate supported use statewide. Continued TA and training plan implementation through Q8 will support further statewide use and sustainability of program.</p> <p>Q4 - Updated data attached to Q4 quarterly report.</p>	<p><b>Quarter 3 CB response:</b> Benchmark <u>incomplete</u>. CB requested some additional, more specific data and analysis reflecting actual usage of SG statewide now that policy has been fully implemented. Because the program has experienced limited uptake to date due to its newness, limited information was submitted. DCF has agreed to submit a more thorough summary data report of SG usage in WI statewide through the remainder of the calendar year with the Q4 PIP report. Therefore, the quarter due for this benchmark has been extended to Q4.</p> <p><b>Quarter 4 CB response:</b> Benchmark complete. CB encourages DCF to continue TA efforts to support effective and appropriate implementation of this permanency option around the state.</p>
Goal Ic: Levels of Care Phase 2 Implementation			Applicable CFSR Items: 6, 12, 13, 14, 15, 16, 42			



Action Steps/Benchmarks	Person Responsible	Evidence of Completion	Qtr Due	Qtr Done	Quarterly Update	
<b>Action Step 1:</b> Revise policies and administrative rules to fully implement Levels of Care initiative to standardize licensing and enforce certification requirements for relative caregivers and all foster homes to improve permanency outcomes for children.						
<b>Operational benchmarks (statewide):</b>						
<b>Ic.1.1</b> Create an administrative rule governing the licensing and certifications of all foster homes.	J. Brom	Issuance of Emergency Rule	Q1	Q1	Q1 - Emergency rule filed 12/22/10 for effective date of 01/01/2011. Link to rule, public hearing notices, and other information: <a href="http://dcf.wisconsin.gov/children/foster/levels_of_care/default.htm">http://dcf.wisconsin.gov/children/foster/levels_of_care/default.htm</a>	<b>Quarter 1 CB response:</b> Benchmark complete.
<b>Ic.1.2</b> Modify and create forms for agency documentation of licensing and CANS tool, and enhance eWiSACWIS to support new documentation requirements.	J. Brom, A. Olson, eWiSACWIS team	Summary report of forms created and provider III redesign implementation (Current status: Design complete and scheduled for June 2011 production)	Q1	Q1	Q1 - Forms created or modified as part of eWiSACWIS 02/21/2011 release to support new documentation requirements for licensing and use of the CANS tool.	<b>Quarter 1 CB response:</b> Benchmark complete. CB and DCF agreed that the matrix-embedded statement "Forms created or modified as part of eWiSACWIS 02/21/2011 release to support new documentation requirements for licensing and use of the CANS tool" was a sufficient EOC for this action step and that all elements of this benchmark are complete. CB and DCF also agreed that the attached EOC originally submitted for this benchmark was confusing and not required. It was agreed that the Q2 report would be updated to reflect these minor changes. <b>Quarter 2 CB response:</b> The matrix was updated as needed.
<b>Action Step 2:</b> Provide field, classroom, and on-line training to improve consistency in foster care licensing, and to utilize LOC requirements to improve permanency outcomes.						
<b>Operational benchmarks (statewide):</b>						
<b>Ic.2.1</b> Develop reports for state and agency monitoring for outcomes and consistency of licensing practices.	J. Brom, A. Olson	Summary of monitoring reports	Q3	Q3	Q3 - Reports for monitoring outcomes and consistency of licensing practices developed. Summary of developed reports attached with Q3 quarterly report.	<b>Quarter 3 CB response:</b> Benchmark complete. To supplement the EOC originally submitted with this benchmark, DCF provided the additional, more comprehensive updated LOC evaluation plan inclusive of the monitoring reports. This additional report, together with the rich discussion during the Q3 meeting, demonstrated the thoroughness with which DCF is monitoring the LOC roll-out.
<b>Ic.2.2</b> Provide training, technical assistance, and monitoring of outcomes related to Levels of Care Initiative. Include training on use of the CANS to inform practice to better locate and engage relatives, and preserve familial and community connections. Provide on-line CANS training to provide certification and re-certification.	J. Brom, A. Olson	Summary reports on training/ technical assistance provided; Analysis of training process experience	Q4, Q8	Q4	Q4 - Summary analysis of training attached with Q4 quarterly report.	<b>Quarter 4 CB response:</b> Benchmark complete.



Ic.2.3 Develop and provide training and technical assistance on the changes to Ch. DCF 56, Admin. Code.	J. Brom, A. Olson, C. Sieck	Training curriculum and summary report	Q4	Q4	Q4 - Training curriculum and summary analysis attached with Q4 quarterly report.	<b>Quarter 4 CB response:</b> Benchmark complete. Hardcopy version of the training curriculum supplied by DCF during the onsite visit 3/22/12.
Ic.2.4 Implement on-line pre-requisite training for foster care licensors.	J. Brom, A. Olson	Summary report of on-line DCF 56 Admin. Rule training	Q8			
<b>Primary Strategy II: Improving Family Engagement and Well-Being</b>			<b>Applicable CFSR Outcomes or Systemic Factors:</b> WB1, WB2, WB3			
<b>Goal IIa: Increased Family Engagement</b>			<b>Applicable CFSR Items:</b> 17, 18, 19, 20			
<b>Action Steps/Benchmarks</b>	<b>Person Responsible</b>	<b>Evidence of Completion</b>	<b>Qtr Due</b>	<b>Qtr Done</b>	<b>Quarterly Update</b>	
<b>Action Step 1:</b> Implement training, coaching and mentoring efforts to improve practice to support increased family engagement and participation in the case planning and service provision process.						
<b>Operational benchmarks (statewide):</b>						
IIa.1.1 Use the Quality Services Review (QSR) Process to assess and measure worker engagement and contact with the family as well as family involvement in the case planning process.	H. Hobbs	Quarterly report with summary analysis of reviews conducted	Q4, Q8	Q4	Q4 - Summary of reviews conducted attached with Q4 quarterly report.	<b>Quarter 4 CB response:</b> Q4 submission accepted. Adequate progress is being demonstrated on this benchmark to date.
IIa.1.2 Provide county-tailored "Engaging to Build Trusting Relationships" training to identified counties to assure child welfare staff use engagement strategies to build working partnerships with the child and family, difficult to reach family members, and/or out-of home care providers.	C. Sieck	Summary analysis of trainings provided and training evaluations	Q4	Q4	Q4 - Summary analysis of trainings attached with Q4 quarterly report.	<b>Quarter 4 CB response:</b> Benchmark complete. Hard copy of the training evaluations supplied 3/23/12 onsite to supplement the material originally submitted electronically as part of the Q4 submission.
IIa.1.3 For all counties where engagement is identified as a need by a QSR, provide additional onsite coaching and mentoring to strengthen engagement skills and practice.	C. Sieck	Quarterly report with summary of coaching and mentoring provided	Q4, Q8	Q4	Q4 - Summary of coaching and mentoring provided attached with Q4 quarterly report.	<b>Quarter 4 CB response:</b> Q4 submission accepted. Adequate progress is being demonstrated on this benchmark to date.
<b>Action Step 2:</b> Provide data and consultation to assist agencies in improving caseworker visits with children and families.						
<b>Operational benchmarks (statewide):</b>						
IIa.2.1 DSP provides quarterly data on caseworker contacts to county agencies.	K. Sepnieski	Summary of data results in quarterly reports	Q4	Q4	Q4 - Summary of data shared with counties and data results attached with Q4 quarterly report.	<b>Quarter 4 CB response:</b> Benchmark complete. Really great work.
IIa.2.2 BRO will meet with counties to discuss data reports and identify counties which have difficulty meeting federal benchmarks.	K. Sepnieski, BRO	Summary of meetings with counties	Q4	Q4	Q4 - Summary of BRO meetings with counties attached with Q4 quarterly report.	<b>Quarter 4 CB response:</b> Benchmark complete.
IIa.2.3 BRO will collaborate with DSP and county agencies to assist identified counties in formulating action plans to meet federal benchmarks.	K. Sepnieski, BRO	Summary of action plans developed	Q4	Q4	Q4 - Summary of BRO and DSP assistance to formulate action plans attached with Q4 quarterly report.	<b>Quarter 4 CB response:</b> Benchmark complete.
IIa.2.4 BRO will collaborate with DSP and county agencies to provide ongoing consultation to assist counties in maintaining federal benchmarks in caseworker visits.	K. Sepnieski, BRO	Summary report of ongoing consultations	Q8			
<b>Goal IIb: Evaluate use of Child and Adolescent Needs and Strengths (CANS) standardized assessment tool to improve well-being</b>			<b>Applicable CFSR Items:</b> 21, 22, 23			
<b>Action Steps/Benchmarks</b>	<b>Person Responsible</b>	<b>Evidence of Completion</b>	<b>Qtr Due</b>	<b>Qtr Done</b>	<b>Quarterly Update</b>	
<b>Action Step 1:</b> Analyze use of the CANS tool to better assess the well-being needs of all children in out-of-home care and their parents.						
<b>Operational benchmarks (statewide):</b>						



<p><b>IIb.1.1</b> Incorporate the CANS tool for all children placed in out-of-home care into the foster home rules, and implement use of the tool in foster homes through face-to-face training and ongoing technical assistance.</p>	J. Brom, A. Olson, M. Morse	Summary report of issuance of emergency rules and Uniform Foster Care Rate Setting Policy, and CANS tool implementation activities for foster homes	Q1	Q1	<p>Q1 - Emergency rule filed 12/22/10 for effective date of 01/01/2011. Foster Care Rate Setting Policy issued February 24, 2011. Link to Foster Care Rate Setting Policy: <a href="http://dcf.wisconsin.gov/memos/num_memos/DS/P/2011/2011-03.pdf">http://dcf.wisconsin.gov/memos/num_memos/DS/P/2011/2011-03.pdf</a>. Use of CANS tool currently applies to all foster homes. Met with key stakeholders regarding changes, completed face-to-face trainings for Bureau of Milwaukee Child Welfare staff; held 6 other CANS trainings in balance of state, held informational roundtables for licensing staff, and began development of on-line training. Link to rule, public hearing notices, information about the CANS, and webcast trainings: <a href="http://dcf.wisconsin.gov/children/foster/levels_of_care/default.htm">http://dcf.wisconsin.gov/children/foster/levels_of_care/default.htm</a>.</p>	<p><b>Quarter 1 CB response:</b> Benchmark <u>incomplete</u> because the CANS tools are not yet implemented in group homes and RCCs. CB and DCF agreed to update the matrix to include a discrete benchmark for foster homes with a Q1 due date (now complete), and add a new benchmark reflecting CANS roll-out to group homes and RCCs with a later quarter due date TBD within the 2 year PIP implementation period.</p> <p><b>Quarter 2 CB response:</b> Benchmark IIb.1.4 was added as needed to incorporate a later CANS implementation date for RCCs and group homes. The language in benchmark IIb.1.1 still needs to be amended to remove group homes and RCCs, though the benchmark is complete in terms of CANS implementation for foster homes.</p> <p><b>Quarter 3 CB response:</b> Benchmark complete. The matrix has been updated as needed.</p>
<p><b>IIb.1.2</b> Develop evaluation reports to analyze use of the CANS tool to improve provision of educational, physical and mental health services to children, as well as services to parents.</p>	J. Brom, A. Olson	Summary of evaluation reports	Q1	Q1	<p>Q1 - Began design of data reports for implementation of evaluation plan. Summary of data reports developed attached with Q2 quarterly report.</p>	<p><b>Quarter 1 CB response:</b> Benchmark <u>incomplete</u>. The EOC originally submitted reflects a list of reports to be used to evaluate CANS implementation but not the actual DCF evaluation plan to monitor the implementation of this practice change. CB and DCF agreed to update the matrix to change the original IIb.1.2 benchmark to reflect the development of the evaluation reports already submitted and to incorporate a new benchmark with a Q2 or Q3 quarter due date that will demonstrate the development of the actual evaluation plan. The Q2 report will reflect these updates to the matrix.</p> <p><b>Quarter 2 CB response:</b> Benchmark is now <u>complete</u>, and the newly added benchmark IIb.1.3 is included as we agreed during the Q1 PIP discussion. The rest of the action step was adjusted as needed to accommodate the new benchmark.</p>
<p><b>IIb.1.3</b> Develop evaluation plan to analyze use of the CANS tool to improve provision of educational, physical and mental health services to children, as well as services to parents.</p>	J. Brom, A. Olson	Evaluation plan	Q2	Q2	<p>Q2 - Completed evaluation plan and continued design of data reports. Evaluation plan attached with Q2 quarterly report.</p>	<p><b>Quarter 2 CB response:</b> Benchmark complete.</p>



<b>IIb.1.4</b> Fully implement use of the CANS tool for groups homes and RCCs through face-to-face training and ongoing technical assistance.	J. Brom, A. Olson, M. Morse	Summary report of CANS tool implementation activities for group homes and RCCs	Q4	Q4	Q4 - Information regarding CANS tool for group homes and RCCs included in initial rollout training prior to required use of tool in those settings. Policy to implement and require use of CANS tool for group homes and RCCs published January 20, 2012: <a href="http://dcf.wisconsin.gov/memos/num_memos/DS P/2012/2012-01.pdf">http://dcf.wisconsin.gov/memos/num_memos/DS P/2012/2012-01.pdf</a> Legal complications identified prevent Division of Juvenile Corrections (DJC) staff from entering information directly into eWiSACWIS. As remedy DJC built indicators into DJC electronic case management system. Collaborative meetings held between DCF and DJC on 4/15/11; 8/15/11; and 10/10/11 to resolve issues and fully implement CANS in all out-of-home care settings. DCF and DJC will continue collaboration to ensure successful implementation.	<b>Quarter 4 CB response:</b> Benchmark complete. CB supports DCF in the efforts to continue to support effective implementation of CANS within all placement settings.
<b>IIb.1.5</b> Implement evaluation plan to identify gaps in service.	J. Brom, K. Trastek	Progress reports per plan	Q5	Q5	Q5 - Evaluation plan implemented. Progress report, service array survey, and survey invitation attached with Q5 quarterly report.	
<b>IIb.1.6</b> Evaluate results and develop recommendations for improving the provision of well-being services to children and parents.	J. Brom, K. Trastek	Report with recommendations	Q8			
<b>Primary Strategy III: Improving Safety Timeliness &amp; Response</b>			<b>Applicable CFSR Outcomes or Systemic Factors: S1, S2</b>			
<b>Goal IIIa: Improve the quality of assessments and planning to address child safety</b>			<b>Applicable CFSR Items: 2, 3, 4</b>			
<b>Action Steps/Benchmarks</b>	<b>Person Responsible</b>	<b>Evidence of Completion</b>	<b>Qtr Due</b>	<b>Qtr Done</b>	<b>Quarterly Update</b>	
<b>Action Step 1:</b> Strengthen policy, practice, and training to support children remaining safely in their own home.						
<b>Operational benchmarks (statewide):</b>						
<b>IIIa.1.1</b> Revise draft of Safety Intervention Standards and gain feedback from external stakeholders.	C. Klick	Summary report of statewide input	Q1	Q1	Q1 - External input gathered and revisions to Standards made. Summary report of statewide input attached to Q1 quarterly report.	<b>Quarter 1 CB response:</b> Benchmark complete.
<b>IIIa.1.2</b> Update and reissue the Safety Intervention Standards.	C. Klick	Summary report of issued Standards	Q2	Q2	Q2 - Revised Safety Intervention Standards issued. Link to memo which includes revisions as attachment: <a href="http://dcf.wisconsin.gov/memos/num_memos/DS P/2011/2011-07.pdf">http://dcf.wisconsin.gov/memos/num_memos/DS P/2011/2011-07.pdf</a>	<b>Quarter 2 CB response:</b> Benchmark complete.
<b>IIIa.1.3</b> Modify eWiSACWIS to include updated safety templates, tools and case record documentation requirements.	C. Klick	Summary report of finalized eW Changes (Current status: Design completed and scheduled for June 2011 production)	Q3	Q3	Q2 - Changes to eWiSACWIS made to support modifications to CPS Safety Intervention Standards effective July 5, 2011.  Q3 - Changes to eWiSACWIS made to support modifications to CPS Safety Intervention Standards effective July 5, 2011.	<b>Quarter 2 CB response:</b> Benchmark currently designated as <i>incomplete</i> for Q2. As discussed during the 9.20.11 meeting, CB understands the slight delay with the eWiSACWIS changes resulting in the 7/5/11 effective date and approves the modest extension for benchmark IIIa.1.3 to Q3. DCF will update the matrix accordingly with the Q3 submission. <b>Quarter 3 CB response:</b> Benchmark complete.



IIIa.1.4 Revise training curriculum.	C. Klick, C. Sieck	Summary report of training curriculum updates	Q3	Q2	Q2 - Safety Foundation Training and Safety Booster Training curricula and associated materials revised to reflect changes in Impending Danger Threats and technical language. Case application materials modified to better support revised threats. Materials and instructions to trainers uploaded to WCWPDS's Curriculum Library to be used statewide. WCWPDS staff, DCF staff and safety trainers participated in conference call to anticipate and address potential Safety Intervention Standards revision issues participants may raise in training to assure thorough, consistent response.	<b>Quarter 2 CB response:</b> Benchmark complete.
IIIa.1.5 Through training and on-site coaching and mentoring that is organized and maintained by the Safety Coordinator, provide field and classroom training to support local practice change in all 72 counties.	C. Klick, C. Sieck	Summary reports of on-site training	Q6		Q3 - On-site training provided in 4 sites to reach 24 counties. Regional training partnerships continue to offer Safety Foundation training for new staff and Safety Booster training for experienced staff. Summary of training and other TA provided attached with Q3 quarterly report.	<b>Quarter 3 CB response:</b> Per our discussion during the Q3 meeting, DCF and CB have agreed to retain only the Q6 quarter due date for this benchmark; the matrix should be adjusted to reflect this change with the Q4 submission. Adequate progress is being made on this benchmark to date. CB requests that the EOC submitted for this benchmark during Q6 reflect the numbers and types of staff trained, the intention for ensuring spread of this information statewide, and any evaluation information that is available for the trainings.
<b>Action Step 2:</b> Develop and provide a statewide training program which results in enhanced safety expertise among supervisors.						<b>Quarter 3 CB response:</b> CB and DCF discussed the possibility of a renegotiation of this Action Step during the Q3 meeting. The concept of "mandating" and "certifying" safety experts may be difficult to implement within the WI state system. Some adjustments may be needed, though the substantive intent of this Action Step is still rolling out as planned. DCF is going to discuss this matter in more detail internally and will most likely propose an alternate plan or wording to reflect what is actually occurring in WI.
<b>Operational benchmarks (targeted):</b>						
IIIa.2.1 Collaborate with the National Resource Center on Child Protective Services (NRCCPS) to field test the "Supervisors as Safety Decision Makers" (SSDM) program.	C. Klick, A. Smith	Summary analysis of field test	Q1	Q1	Q1 - Technical assistance obtained from the National Resource Center for Child Protective Services (NRCCPS) to facilitate the 22 week SSDM program as a field test. Summary analysis of field test attached to Q1 quarterly report.	<b>Quarter 1 CB response:</b> Benchmark complete.
IIIa.2.2 Add a Safety Coordinator to the Central Professional Development unit to focus on developing local expertise.	C. Sieck	Summary report of new Safety Coordinator's responsibilities	Q1	Q1	Q1 - Safety Coordinator hired. Summary report of new Safety Coordinator's responsibilities attached to Q1 quarterly report.	<b>Quarter 1 CB response:</b> Benchmark complete.



IIIa.2.3 Make any needed revisions to the program and develop a work plan with the NRCCPS to transition program to Central Professional Development unit and build in-state capacity to facilitate the program.	C. Sieck	Summary analysis of revisions and work plan	Q5	Q5	Q3 - Wisconsin Child Welfare Professional Development System assumed responsibility for revision and implementation of Supervising Safety Decision Making (SSDM) May, 2011. Summary report including results of field test and goals of program revision; revised participant schedule based on program revisions; and development of in-state capacity attached to Q3 quarterly report.  Q5 - Revisions made and work plan developed. Work plan includes benchmarks completed to revise content as well as implementation plan through Quarter 8. Summary report includes goals for revision based on concerns identified during field test. Summary report and work plan attached with Q5 quarterly report.	<b>Quarter 3 CB response:</b> Benchmark <u>incomplete</u> . CB indicated that a more defined plan would be needed that reflected how the key concerns identified during the field test were going to be addressed in the work going forward. CB and DCF agreed during the Q3 meeting to extend the quarter due date of this benchmark to Q5 and the matrix should be revised accordingly with the next submission.
IIIa.2.4 Implement work plan to transition program to Central Professional Development unit.	C. Sieck	Quarterly report with summary of work plan implementation	Q5	Q5	Q5 - Wisconsin Child Welfare Professional Development System assumed responsibility for revision and implementation of SSDM May, 2011. Work plan with implementation efforts to date attached with Q5 quarterly report.	
IIIa.2.5 Select participants from Wisconsin to begin program to become statewide facilitators.	C. Sieck	Summary of trainings for facilitators	Q7	Q5	Q5 - Participants selected and trainings initiated. Summary report of participants selected and trainings attached with Q5 quarterly report.	
IIIa.2.6 Select next group of supervisors to participate in program and continue implementation of long-term training.	C. Sieck	Quarterly report with summary of work plan implementation and plan for long-term training capacity	Q8			
<b>Goal IIIb: Improve performance on timeliness of initiating Initial Assessments</b>			<b>Applicable CFSR Items: 1</b>			
<b>Action Steps/Benchmarks</b>	<b>Person Responsible</b>	<b>Evidence of Completion</b>	<b>Qtr Due</b>	<b>Qtr Done</b>	<b>Quarterly Update</b>	
<b>Action Step 1:</b> Use eWiSACWIS reports and regional staff to track & monitor timeliness of initiating initial assessments.						
<b>Operational benchmarks (statewide):</b>						
IIIb.1.1 Develop a performance management report and TA plan for counties to track timeliness of initiating assessments.	W. Henderson, T. Muender, BRO	Summary of performance management report and training process developed	Q1	Q1	Q1 - Design of performance management report completed and currently in production. Testing completed in four counties. Communication and TA plan developed. The performance management report and training process is summarized in the DSP Info Memo: <a href="http://dcf.wisconsin.gov/memos/infomemos/DSP/2011/2011-03.pdf">http://dcf.wisconsin.gov/memos/infomemos/DSP/2011/2011-03.pdf</a>	<b>Quarter 1 CB response:</b> Benchmark complete.
IIIb.1.2 Implement performance management report and TA plan.	T. Muender, W. Henderson, BRO	Summary analysis of report and TA plan implementation	Q2	Q2	Q2 - New Initial Assessment report released in eWiSACWIS in February, 2011. Summary analysis of report and TA plan implementation attached with Q2 quarterly report.	<b>Quarter 2 CB response:</b> Benchmark complete.
IIIb.1.3 Develop and implement an ongoing process to monitor timeliness of county and BMCW assessment initiation.	T. Muender, W. Henderson, BRO; BMCW	Summary analysis of ongoing monitoring system	Q4	Q4	Q4 - Summary report of ongoing monitoring and technical assistance attached with Q4 quarterly report.	<b>Quarter 4 CB response:</b> Benchmark complete.



<b>Primary Strategy IV: Building Service Capacity</b>			<b>Applicable CFSR Outcomes or Systemic Factors:</b> WB3, Service Array			
<b>Goal IVa: Expansion of intensive in-home services</b>			<b>Applicable CFSR Items:</b> 36, 37			
<b>Action Steps/Benchmarks</b>	<b>Person Responsible</b>	<b>Evidence of Completion</b>	<b>Qtr Due</b>	<b>Qtr Done</b>	<b>Quarterly Update</b>	
<b>Action Step 1:</b> Provide short-term, concentrated, in-home services to families so that they may remain safely together, thus preventing the need for out-of-home placement for children whenever possible.						
<b>Operational benchmarks (targeted):</b>						
<b>IVa.1.1</b> Finalize concept paper and competitive award process with input from external stakeholders.	C. Klick	Concept paper and summary of competitive award process	Q3	Q3	Q3 - Concept paper and competitive award process finalized in Q3 and published online as action memo in Q4: <a href="http://dcf.wisconsin.gov/memos/num_memos/DS/P/2011/2011-11.pdf">http://dcf.wisconsin.gov/memos/num_memos/DS/P/2011/2011-11.pdf</a>	<b>Quarter 3 CB response:</b> Benchmark complete.
<b>IVa.1.2</b> Issue action memo for competitive award process for intensive in-home services program.	C. Klick	Action memo	Q4	Q4	Q4 - Action memo published on October 19, 2011: <a href="http://dcf.wisconsin.gov/memos/num_memos/DS/P/2011/2011-11.pdf">http://dcf.wisconsin.gov/memos/num_memos/DS/P/2011/2011-11.pdf</a>	<b>Quarter 4 CB response:</b> Benchmark complete.
<b>IVa.1.3</b> Select sites for targeted implementation based on competitive award process.	C. Klick	Summary of site selection	Q5	Q4	Q4 - Sites selected based on competitive award process. Summary of grantees attached to Q4 quarterly report.	<b>Quarter 4 CB response:</b> Benchmark complete. This initiative looks like it has the potential to have a really positive impact at the local level.
<b>IVa.1.4</b> Provide technical assistance and support to selected site(s).	C. Klick, T. Muender	Summary analysis of targeted program implementation and TA provided	Q8			
<b>Goal IVb: Nursing Initiative: BMCW Targeted Implementation</b>			<b>Applicable CFSR Items:</b> 22, 37			
<b>Action Steps/Benchmarks</b>	<b>Person Responsible</b>	<b>Evidence of Completion</b>	<b>Qtr Due</b>	<b>Qtr Done</b>	<b>Quarterly Update</b>	
<b>Action Step 1:</b> Initiate the BMCW Nurse Family Engagement program.						
<b>Operational benchmarks (targeted):</b>						
<b>IVb.1.1</b> Support hiring of qualified Registered Nurses by contracted ongoing case management agencies.	Dr. M. Urban, K. Elertson	Registered Nurse positions filled	Q1	Q1	Q1 - Qualified registered nurse positions filled, and all nurses received orientation with verification of core competencies.	<b>Quarter 1 CB response:</b> Benchmark complete. CB and DCF agreed that the statement in the matrix acknowledging the hiring of these nurse positions is a sufficient EOC.
<b>IVb.1.2</b> Develop and oversee nurse orientation training and verification of core competencies in collaboration with identified vendors.	K. Elertson, Dr. M. Urban	Summary report of orientation and training completed	Q2	Q2	Q2 - Standardized competency based orientation plan and assessment tool used to complete training process for each registered nurse. All seven Ongoing Care RNs successfully completed orientation and training activities. Annual validation and feedback planned to ensure continued competency and professional growth in nursing role. Orientation Plan with rationale attached with Q2 quarterly report.	<b>Quarter 2 CB response:</b> Benchmark complete.



IVb.1.3 Initiate periodic RN home visits to children under 3 in out-of-home care.	K. Elertson, Dr. M. Urban	eWiSACWIS reports and summary report of periodic home visits	Q2	Q2	Q2 - Periodic home visits completed by Ongoing Care RNs on monthly basis for infants ages newborn to 6 months of age in out-of-home care. Infants and toddlers 6-35 months of age visited every 90 days by assigned Ongoing Care RN. Ongoing Care RNs completed approximately 1015 nurse home visits during first two quarters for infants and toddlers in out-of-home care.	<b>Quarter 2 CB response:</b> Benchmark complete.
<b>Action Step 2:</b> Collaborate with the Children's Hospital of Wisconsin Outcomes Center to monitor outcomes and evaluate program.						
<b>Operational benchmarks (targeted):</b>						
IVb.2.1 Standardize RN home visitation, practice standards, and policies.	K. Elertson, Dr. M. Urban	Summary report of standards identified and issued policies	Q3	Q3	Q3 - Registered nurse home visitation practice standards developed for the nursing staff, including orientation and training; nursing physical assessment; documentation; and data submission. After direct observation and practice review, policies and job aides drafted to reflect and support established standards. Drafts of orientation and training, physical assessment, documentation, annual feedback and competency validation forms attached with Q3 quarterly report.	<b>Quarter 3 CB response:</b> Benchmark complete.
IVb.2.2 Collaborate with external stakeholders to form quality oversight workgroup.	Dr. M. Urban, K. Elertson	Summary of workgroup members identified; Meetings schedule	Q4	Q4	Q4 - Workgroup summary attached with Q4 quarterly report.	<b>Quarter 4 CB response:</b> Benchmark complete. CB appreciated the opportunity to meet with and learn from representatives from the RN home visitation program. This seems like some really exciting work.
IVb.2.3 Develop quality indicators to monitor desired outcomes of Nurse Family Engagement program.	Dr. M. Urban, K. Elertson	Summary analysis of quality indicators developed	Q8			
<b>Goal IVc: The Future of Child Welfare: Practice Model</b>			<b>Applicable CFSR Items:</b> 36, 37			
<b>Action Steps/Benchmarks</b>	<b>Person Responsible</b>	<b>Evidence of Completion</b>	<b>Qtr Due</b>	<b>Qtr Done</b>	<b>Quarterly Update</b>	
<b>Action Step 1:</b> Develop practice model to guide policy, practice, service provision, quality assurance, and training consistently statewide.						
<b>Operational benchmarks (statewide):</b>						
IVc.1.1 Conduct work group meetings to develop statewide practice model. Representatives will include county, state, tribal, training and private provider representatives.	J. Elliott	Summary of workgroup meeting discussions	Q2	Q2	Q2 - Workgroup meetings held in November and December, 2010. Summary of workgroup meetings and discussions, as well as focus groups to gather feedback on draft Practice Model, attached with Q2 quarterly report.	<b>Quarter 2 CB response:</b> Benchmark complete. CB and DCF discussed WT's significant progress regarding the draft of the Practice Model and CB provided feedback on specific components that we thought could be potentially be enhanced in the model, including: inclusion of fathers, commitment to relative placement, and quality visitation.



<b>IVc.1.2</b> Conduct focus groups of all stakeholders to collect feedback and revise practice model.	J. Elliott	Summary of feedback from state-wide focus groups	Q3	Q2	Q2 - Feedback gathered from online survey and in-person focus groups. Evidence of Completion for Action Step IVc.1.1 attached with Q2 quarterly report includes summary of focus groups held. Summary of feedback as well as draft Practice Model attached with Q2 quarterly report.	<b>Quarter 2 CB response:</b> Benchmark completed early in Q2.
<b>IVc.1.3</b> Develop and issue statewide child welfare practice model.	J. Elliott	Practice model	Q5	Q5	Q5 - Wisconsin Child Welfare Practice Model finalized and published. Informational memo issued to announce Practice Model, provide guidelines around purpose and use, and summarize plans for implementation and training: <a href="http://dcf.wisconsin.gov/memos/infomemos/DSP/2012/2012-04.pdf">http://dcf.wisconsin.gov/memos/infomemos/DSP/2012/2012-04.pdf</a>	
<b>IVc.1.4</b> Develop an implementation plan to provide training and technical assistance to integrate the child welfare practice model statewide.	J. Elliott	Summary of implementation activities	Q8			
<b>IVc.1.5</b> Initiate core service array study to identify core services, gaps in service, and service structure changes to provide core services statewide. Core service array study will be completed through implementation of evaluation plan described in Benchmark IIb.1.5. Evaluation plan includes analysis of CANS outcomes and service provision statewide, to identify gaps in service and develop recommendations for improving the provision of well-being services to children and parents. Evidences of Completion under Benchmarks IIb.1.5 and IIb.1.6 will provide progress summary and recommendations developed through the study.	J. Elliott	Action plan for service array study and implementation plan (See Evidence of Completion under Benchmark IIb.1.6)	Q8			
<b>Goal IVd: Address the need for bilingual &amp; culturally-competent services</b>			<b>Applicable CFSR Items: 36, 37</b>			
<b>Action Steps/Benchmarks</b>	<b>Person Responsible</b>	<b>Evidence of Completion</b>	<b>Qtr Due</b>	<b>Qtr Done</b>	<b>Quarterly Update</b>	
<b>Action Step 1:</b> Develop an implementation plan for advancing the recommendations of the Workgroup on Safety and Well-Being for Immigrant and Refugee Children and Families.						
<b>Operational benchmarks (statewide):</b>						
<b>IVd.1.1</b> Submit Workgroup report with recommendations.	J. Majerus	Workgroup report and summary of DCF's plan for analysis	Q1	Q1	Q1 - Workgroup report submitted and available online: <a href="http://dcf.wisconsin.gov/children/immigrant_refugee/pdf/child_welfare_report.pdf">http://dcf.wisconsin.gov/children/immigrant_refugee/pdf/child_welfare_report.pdf</a> . Plan for analysis attached to Q1 quarterly report.	<b>Quarter 1 CB response:</b> Benchmark complete.
<b>IVd.1.2</b> Prioritize recommendations of the workgroup based on the feasibility and impact of implementing policy or programs.	J. Majerus	Written proposals with analysis	Q2	Q2	Q2 - Summary report of prioritized recommendations attached with Q2 quarterly report.	<b>Quarter 2 CB response:</b> Benchmark complete.
<b>IVd.1.3</b> Develop implementation plan for advancing changes in policy or initiating programs to improve access to bilingual and culturally-competent services.	J. Majerus	Implementation plan	Q4	Q4	Q4 - Workgroup developed two-year implementation plan and initiated implementation. Plan attached with Q4 quarterly report.	<b>Quarter 4 CB response:</b> Benchmark complete. Really outstanding work.
<b>IVd.1.4</b> Initiate implementation plan (i.e. begin writing policy, meeting with legislators, or seeking funding, etc.).	J. Majerus	Quarterly report with summary of implementation activities	Q7	Q5	Q5 - Implementation plan initiated. Summary report of implementation activities attached with Q5 quarterly report.	
<b>Action Step 2:</b> Produce a guidebook for service providers which will clarify eligibility for public assistance benefits.						



<b>Operational benchmarks (statewide):</b>						
<b>IVd.2.1</b> Draft guidebook.	J. Majerus	Guidebook draft	Q3	Q2	Q2 - Draft guidebook completed and available online: <a href="http://dcf.wisconsin.gov/children/immigrant_refugee/guidebook.htm">http://dcf.wisconsin.gov/children/immigrant_refugee/guidebook.htm</a>	<b>Quarter 2 CB response:</b> Benchmark completed early in Q2.
<b>IVd.2.2</b> Share guidebook with external stakeholders for input on development.	J. Majerus	Summary of feedback from external stakeholders	Q4	Q4	Q4 - Stakeholder involvement and summary of feedback attached with Q4 quarterly report.	<b>Quarter 4 CB response:</b> Benchmark complete. Impressive work.
<b>IVd.2.3</b> Issue guidebook to local service agencies and post online.	J. Majerus	Guidebook published and available on DCF website	Q5	Q5	Q5 - Guidebook finalized and published. Informational memo issued to announce publication of Guidebook and encourage further feedback on content and usability: <a href="http://dcf.wisconsin.gov/memos/infomemos/DSP/2012/2012-05.pdf">http://dcf.wisconsin.gov/memos/infomemos/DSP/2012/2012-05.pdf</a> . Guidebook will continue to be updated as more resources become available or as changes to eligibility require.	
<b>Primary Strategy V: Professional Development Enhancements</b>			<b>Applicable CFSR Outcomes or Systemic Factors:</b> Training			
<b>Goal Va: Mandated Foster Parent Training</b>			<b>Applicable CFSR Items:</b> 34			
<b>Action Steps/Benchmarks</b>	<b>Person Responsible</b>	<b>Evidence of Completion</b>	<b>Qtr Due</b>	<b>Qtr Done</b>	<b>Quarterly Update</b>	
<b>Action Step 1:</b> Implement mandated foster parent training to assure all licensed foster parents receive required training.						
<b>Operational benchmarks (targeted):</b>						
<b>Va.1.1</b> Standardize Pre-Placement Training curriculum by creating web-based and face-to-face versions.	A. Olson	Published versions of the web-based and face-to-face training	Q1	Q1	Q1 - Web-based and face-to-face training materials completed and published online: <a href="http://wcpds.wisc.edu/foster-parent-training/">http://wcpds.wisc.edu/foster-parent-training/</a>	<b>Quarter 1 CB response:</b> Benchmark complete.
<b>Va.1.2</b> Standardize training requirements for all certification levels and amend licensing code to reflect training requirements.	A. Olson, J. Brom	Promulgation of emergency rule	Q1	Q1	Q1 - Emergency rule filed 12/22/10 for effective date of 01/01/2011, with standardized training requirements for all foster care. Link to rule, public hearing notices, and other information: <a href="http://dcf.wisconsin.gov/children/foster/levels_of_care/default.htm">http://dcf.wisconsin.gov/children/foster/levels_of_care/default.htm</a>	<b>Quarter 1 CB response:</b> Benchmark complete.
<b>Va.1.3</b> Begin provision of training.	A. Olson	Summary report of completed training hours	Q1	Q1	Q1 - Training initiated and implemented statewide. Summary of completed training hours attached to Q1 quarterly report.	<b>Quarter 1 CB response:</b> Benchmark complete.
<b>Va.1.4</b> Develop a plan for evaluating the efficacy and delivery of the training.	A. Olson, C. Sieck	Draft of evaluation plan	Q3	Q4	Q3 - Evaluation plan completed and attached to Q3 quarterly report.  Q4 - Supplemental materials to support information provided in Q3 quarterly report attached with Q4 quarterly report.	<b>Quarter 3 CB response:</b> Benchmark currently <u>incomplete</u> . CB requests some additional information reflecting how the domains covered in the EOC originally submitted are going to be measured. There was substantive discussion about DCF's evaluation plans during the Q3 meeting and DCF agreed to send additional documentation reflecting this more defined evaluation plan with the Q4 submission. <b>Quarter 4 CB response:</b> Benchmark complete.



Va.1.5 Gather feedback on the efficacy and delivery of the training and modify to support practice enhancement.	A. Olson	Completed surveys; Summary report of modified trainings	Q6			
<b>Goal Vb: Implement Learning Management System (LMS)</b>			<b>Applicable CFSR Items: 32, 33</b>			
<b>Action Steps/Benchmarks</b>	<b>Person Responsible</b>	<b>Evidence of Completion</b>	<b>Qtr Due</b>	<b>Qtr Done</b>	<b>Quarterly Update</b>	
<b>Action Step 1:</b> Implement Learning Management System that includes a central warehouse of compliance information, integration of testing, and a central repository for e-learning and informal learning events.						
<b>Operational benchmarks (statewide):</b>						
Vb.1.1 Complete needs analysis.	C. Sieck	Needs analysis	Q1	Q1	Q1 - Needs analysis completed and attached to Q1 quarterly report.	<b>Quarter 1 CB response:</b> Benchmark complete.
Vb.1.2 Distribute RFP with identified needs to LMS vendors.	C. Sieck	Summary of RFP distribution	Q2	Q2	Q2 - RFP document distributed in March, 2011 with proposals due April 20, 2011. Wisconsin Child Welfare Professional Development System received 7 different vendor proposals in response to distributed RFP.	<b>Quarter 2 CB response:</b> Benchmark complete.
Vb.1.3 Contract with LMS vendor and work on needed modifications.	C. Sieck	Summary report of completed contract	Q4	Q4	Q3 - Vendor selected for learning management system and contracting process initiated between University of Wisconsin-Madison Purchasing and Cornerstone on Demand (CSOD). Assignment of CSOD implementation manager on purchase order may be expended until signed contract in place to allow for implementation activities to begin and to maintain implementation schedule. Draft license agreement between UW-Madison and CSOD attached with Q3 quarterly report.  Q4 - Contract with CSOD completed and attached with Q4 quarterly report.	<b>Quarter 3 CB response:</b> Benchmark currently <u>incomplete</u> . At the time of the Q3 submission, only the draft licensing agreement was available. It is our understanding that the signed agreement will be submitted with the Q4 report. The minor extension to Q4 has been approved for this benchmark and the next matrix submission should reflect this change. <b>Quarter 4 CB response:</b> Benchmark complete.
Vb.1.4 Implement LMS.	C. Sieck	Summary analysis of LMS implementation	Q5	Q5	Q5 - LMS ("PDS online") implemented. Summary of LMS implementation attached with Q5 quarterly report.	<b>Quarter 3 CB response:</b> As agreed upon during the Q3 meeting, the due date for this benchmark shall be extended to Q5; the slightly delayed contract finalization has resulted in slightly delayed LMS implementation. The Q4 PIP report should reflect this updated due date.
Vb.1.5 Ongoing review of effectiveness.	C. Sieck	Summary analysis of system effectiveness in quarterly reports for quarters 5 through 8.	Q8			
<b>Goal Vc: Improve Performance-Based Management Capacity</b>			<b>Applicable CFSR Items: 32, 33</b>			
<b>Action Steps/Benchmarks</b>	<b>Person Responsible</b>	<b>Evidence of Completion</b>	<b>Qtr Due</b>	<b>Qtr Done</b>	<b>Quarterly Update</b>	
<b>Action Step 1:</b> Utilize performance management approach with local agencies to monitor and improve identified critical areas needing improvement.						
<b>Operational benchmarks (targeted):</b>						



Vc.1.1 Select 5-10 targeted implementation counties and finalize technical, training, and program project plans.	W. Henderson	Summary analysis of targeted sites selected and project plans	Q2	Q2	Q2 - Counties selected and project plan complete. Summary analysis of selected sites and project plan attached with Q2 quarterly report.	<b>Quarter 1 CB response:</b> Benchmark <u>incomplete</u> , since the county selection process has not been finalized. CB and DCF agreed to change the quarter due date from Q1 to Q2 for this benchmark. <b>Quarter 2 CB response:</b> Benchmark <u>complete</u> .
Vc.1.2 Design and develop local performance management initiative. Each selected county will review baseline data and being planning initiatives.	W. Henderson	Baseline data and action plan template	Q4	Q4	Q3 - Baseline data report created for County Data Leadership project. Example and distribution plan attached to Q3 quarterly report.  Q4 - Action plans distributed to counties in November. Template requires each county team to develop performance management goals and identify person responsible for each portion of county initiative. Action plan will also delineate training and support needs for each county. Baseline data report (attached to Q3 quarterly report) provided counties data for several measures to identify specific performance management goals for action plan. Final action plan template attached with Q4 quarterly report.	<b>Quarter 3 CB response:</b> Benchmark currently <u>incomplete</u> . Per our discussion during the Q3 meeting, DCF and CB have agreed to extend the quarter due date to Q4. Some changes are needed in the wording to reflect the evolution of this initiative and WI will submit a proposed renegotiation in advance of the Q4 submission. It is CB's understanding that the intent behind this action step is being meaningfully implemented, but some minor adjustments are needed to the matrix to ensure accurate representation. <b>Quarter 4 CB response:</b> Benchmark complete. CB appreciated the opportunity to hear first hand from some of the participating counties during the onsite visit 3/23/12.
Vc.1.3 Develop individualized training curriculum and on-site support plan for each county team.	W. Henderson	Summary of plan for training and support based on county needs; All-county kick-off meeting agenda	Q4	Q4	Q3 - Through initial meetings with counties, training and support plan developed to begin with kickoff meeting in October where needs of each county will be fine tuned. Kickoff meeting to include representatives from Colorado to provide initiative and implementation consultation. Kickoff will also provide training on assessment methodology and discussion for further technical assistance for implementation. Training and support needs will be addressed through months of November and December with on-site and other consultation, and will be ongoing throughout project implementation as needed.  Q4 - Statewide kick-off meeting held in October. Individualized training and support needs will be addressed through months of February and March with on-site and other consultation, and will be ongoing throughout project implementation as needed. Summary report and agenda for kick-off meeting attached with Q4 quarterly report.	<b>Quarter 3 CB response:</b> Benchmark currently <u>incomplete</u> . Per our discussion during the Q3 meeting, DCF and CB have agreed to extend the quarter due date to Q4. Some changes are needed in the wording to reflect the evolution of this initiative and WI will submit a proposed renegotiation in advance of the Q4 submission. It is CB's understanding that the intent behind this action step is being meaningfully implemented, but some minor adjustments are needed to the matrix to ensure accurate representation.  <b>Quarter 4 CB response:</b> Benchmark complete. It was helpful to hear about the degree of technical assistance that is being provided to participating counties. It is great that the state is able to be such a resource for the county level child welfare departments.



<b>Vc.1.4</b> Implement performance based management initiative by providing training and holding regular meetings to discuss performance on selected measures and county strategies for improvement. County selected measures may include:	W. Henderson, BRO	Summary report of county action items and training provided to each targeted county	Q6			
• Time to Reunification						
• Re-entry into Foster Care						
• Timely Termination of Parental Rights						
• Exits to Permanent Homes for Children in Foster Care 3+ Years						
• Disproportionality						
<b>Vc.1.5</b> Monitor and evaluate targeted implementation, including resources (staff, training, technology) needed to support implementation statewide and any outcome improvements.	W. Henderson, BRO	Summary analysis with evaluation of performance management efforts to date	Q7			
<b>Vc.1.6</b> Develop recommendations for training and support needs to implement performance based management approaches statewide.	W. Henderson, C. Sieck, BRO	Summary of recommendations for statewide implementation	Q8			
<b>Goal Vd: Expand Professional Development offerings on Executive leadership in Child Welfare</b>			<b>Applicable CFSR Items: 32, 33</b>			
<b>Action Steps/Benchmarks</b>	<b>Person Responsible</b>	<b>Evidence of Completion</b>	<b>Qtr Due</b>	<b>Qtr Done</b>	<b>Quarterly Update</b>	
<b>Action Step 1:</b> Expand delivery modalities of and the opportunities for professional development on child welfare leadership.						
<b>Operational benchmarks (statewide):</b>						
<b>Vd.1.1</b> Professional Development Advisory Council (PDAC) workgroup will conduct study of effectiveness of the use of supervisory training materials available through the National Child Welfare Workforce Institute (NCWWI).	C. Sieck	Summary of Recommendations from study	Q1	Q2	Q1 - Effectiveness study completed for relevance to child welfare, and workgroup developed for implementation of LAS. Organizational Effectiveness mentorship program initiated in two counties. Summary of recommendations from effectiveness study for LAS attached to Q1 quarterly report.  Q2 - Per request, revised EOC submitted with Q2 quarterly report, which provides summary of effectiveness study and conclusions from recommendations.	<b>Quarter 1 CB response:</b> Benchmark <u>incomplete</u> since the EOC originally submitted did not reflect information about the effectiveness study or the recommendations derived from those efforts. CB and DCF agreed that DCF would submit an updated EOC in Q2 that better reflected the necessary information. <b>Quarter 2 CB response:</b> Benchmark complete.
<b>Vd.1.2</b> Integrate the use of supervisory training materials from the National Child Welfare Workforce Institute (NCWWI) in the professional development system.	C. Sieck	Summary of online courses being offered	Q6		Q2 - Online course offerings will be delayed to Q4. Professional Development System (WCWPDS) working with National Child Welfare Workforce Institute (NCWWI) to identify most effective and efficient way to make training accessible to staff, including possibility of integrating training modules into Learning Management System to be implemented by Q4. Further analysis and reasoning for delay attached to Q2 quarterly report (included in EOC for Action Step Vd.1.1).	<b>Quarter 2 CB response:</b> Based on the reasoning provided by DCF during the 9/20/11 onsite visit, CB supports the quarter due date extension for benchmark Vd.1.2 to Q6. DCF will update the matrix accordingly in the Q3 submission. <b>Quarter 3 CB response:</b> The matrix has been updated as requested. CB is continuing internal discussion with NCWWI regarding the LAS modules and WI's proposed plan and working toward a resolution that will meet all parties' needs and requirements. CB will provide more information as it becomes available, and if necessary, CB will support modification of the PIP.



<b>Vd.1.3</b> Design CW Director Mentorship program and Organizational Effectiveness model based on child welfare practice model developed under the Future of CW project.	C. Sieck	Summary of Mentorship program and Effectiveness model designed	Q5	Q5	Q5 - CW Director Mentorship program and Organizational Effectiveness model developed. Summary of development process and Director Mentorship survey attached with Q5 quarterly report.	
<b>Vd.1.4</b> Implement the Child Welfare Director mentorship program.	C. Sieck	Summary report of mentorship program in place	Q6	Q5	Q5 - Child Welfare Director mentorship program implemented. Summary report attached with Q5 quarterly report.	
<b>Vd.1.5</b> Implement Organizational Effectiveness model for targeted agencies.	C. Sieck	Summary analysis of implemented Organizational Effectiveness model	Q6	Q5	Q5 - Organizational Effectiveness model implemented for targeted agencies. Efforts continue for expanded implementation for additional agencies. Summary report and referral application attached with Q5 quarterly report.	



<b>State:</b>	Wisconsin
<b>Date Submitted</b>	4/30/2012
<b>PIP:</b>	
<b>Quarterly Report:</b>	√
<b>Quarter:</b>	5

## Part B: National Standards Measurement Plan and Quarterly Status Report

Safety Outcome 1: Absence of Recurrence of Maltreatment												
National Standard	94.6%											
Performance as Measured in Final Report/Source Data Period	94.3% (FFY 2008)											
Performance as Measured at Baseline/Source Data Period	NA											
Negotiated Improvement Goal	NA - National Standard achieved with FFY 2009 profile with a performance of 95.4%											
Renegotiated Improvement Goal												
Status (Enter the quarter end date and measurement for the reported quarter in cell below)	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12
	03/31/11	06/30/11	09/30/11	12/31/11	03/31/12							
	NA	NA	NA	NA	NA							
Note												



Safety Outcome 1: Absence of Maltreatment of Children in Foster Care												
National Standard	99.68%											
Performance as Measured in Final Report/Source Data Period	99.75% (FFY 2008)											
Performance as Measured at Baseline/Source Data Period	NA (FFY 09B and FFY 10A)											
Negotiated Improvement Goal	NA - Met the national standard at the time of the CFSR statewide Assessment and Final Report											
Renegotiated Improvement Goal												
Status (Enter the quarter end date and measurement for the reported quarter in cell below)	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12
	03/31/11	06/30/11	09/30/11	12/31/11	03/31/12							
	NA	NA	NA	NA	NA							
Note												
Permanency Outcome 1: Timeliness and Permanency of Reunification												
National Standard	122.6											
Performance as Measured in Final Report/Source Data Period	97.4 (FFY 2008)											
Performance as Measured at Baseline/Source Data Period	97.4 (FFY 2008)											
Negotiated Improvement Goal	Met minimal improvement target goal of 100.2 as of the FFY 09 A/B profile with a score of 101.8											
Renegotiated Improvement Goal												
Status (Enter the quarter end date and measurement for the reported quarter in cell below)	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12
	03/31/11	06/30/11	09/30/11	12/31/11	03/31/12							
	NA	NA	NA	NA	NA							
Note												



Permanency Outcome 1: Timeliness of Adoptions												
National Standard	106.4											
Performance as Measured in Final Report/Source Data Period	116.9 (FFY 2008)											
Performance as Measured at Baseline/Source Data Period	NA											
Negotiated Improvement Goal	Met the national standard at the time of the CFSR Statewide Assessment and Final Report											
Renegotiated Improvement Goal												
Status (Enter the quarter end date and measurement for the reported quarter in cell below)	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12
	03/31/11	06/30/11	09/30/11	12/31/11	03/31/12							
	NA	NA	NA	NA	NA							
Note												
Permanency Outcome 1: Achieving Permanency for Children in Foster Care for Long Periods of Time												
National Standard	121.7											
Performance as Measured in Final Report/Source Data Period	117.7 (FFY 2008)											
Performance as Measured at Baseline/Source Data Period	NA											
Negotiated Improvement Goal	Met national standard as of the FFY 09B/10A data profile with a score of 123.6											
Renegotiated Improvement Goal												
Status (Enter the quarter end date and measurement for the reported quarter in cell below)	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12
	03/31/11	06/30/11	09/30/11	12/31/11	03/31/12							
	NA	NA	NA	NA	NA							
Note												



Permanency Outcome 1: Placement Stability												
National Standard	101.5											
Performance as Measured in Final Report/Source Data Period	98.1 (FFY 2008)											
Performance as Measured at Baseline/Source Data Period	NA											
Negotiated Improvement Goal	Met national standard as of the FFY 09B/10A data profile with a score of 102.3											
Renegotiated Improvement Goal												
Status (Enter the quarter end date and measurement for the reported quarter in cell below)	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12
	03/31/11	06/30/11	09/30/11	12/31/11	03/31/12							
	NA	NA	NA	NA	NA							
Note												



<b>State:</b>	Wisconsin
<b>Date Submitted</b>	4/30/2012
<b>PIP:</b>	
<b>Quarterly Report:</b>	√
<b>Quarter:</b>	5

### Part C: Item-Specific and Quantitative Measurement Plan and Quarterly Status Report

<b>Outcome/Systemic Factor: Safety Outcome 1</b>												
<b>Item: Performance Item 1 - Timeliness of initiating investigations/assessments of child maltreatment reports</b>												
Performance as Measured in Final Report	66.0%											
Performance as Measured at Baseline/Source Data Period	61.0% eWiSACWIS 12 months 4/1/09 - 3/31/10											
Negotiated Improvement Goal	61.6%											
Method of Measuring Improvement	<p>Administrative Data Report 12 months adjusted on a rolling quarter - first measurement period 7/1/09 - 6/30/10</p> <p>Data Source: eWiSACWIS data which includes documentation of the report date, the response time (i.e. date and time required for initial contact to begin investigation), and date and time of initial contact</p> <p>Numerator: Number of initial contacts made within the required date and time</p> <p>Denominator: Total number of initial contacts required</p> <p>Data: For each PIP quarter, all investigations completed and approved by the supervisor will be extracted and of these total investigations, the number where the initial contact requirement (date and time in minutes) is met will be included in the numerator.</p>											
Renegotiated Improvement Goal												
Status (Enter the quarter end date and measurement for the reported quarter in cell below)	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12
	03/31/11	06/30/11	09/30/11	12/31/11	03/31/12							
	69.4	70.6	74.4	76.7	76.1							
Wisconsin has met the performance improvement goal for Item 1.												



<b>Outcome/Systemic Factor: Safety Outcome 2</b>												
<b>Item: Performance Item 3 - Services to family to protect children in the home and prevent removal or re-entry into out-of-home care.</b>												
Performance as Measured in Final Report	71.0%											
Performance as Measured at Baseline/Source Data Period	89.0% with 104 applicable cases (4/1/09 - 3/31/10)											
Negotiated Improvement Goal	92.9%											
Method of Measuring Improvement	<p>Case review data</p> <p>Data Source: Quality Services Review (QSR) scoring data will be used to report performance related to the following practice indicators associated with the child, siblings and family:</p> <ul style="list-style-type: none"> <li>-Assessment and Understanding of Safety (QSR Practice Review Indicator 4A)</li> <li>-Safety Management: Case Planning Process (QSR Practice Review Indicator 6A)</li> </ul> <p>Numerator: Number of cases where average score for above indicators is a 4 or above on a scale of 1-6</p> <p>Denominator: Total number of cases reviewed</p> <p>Data: Data will be reported in PIP quarter 4, for which the cases from July 2010-December 2011 will be included in the measurement of performance for this item. For each subsequent PIP quarter, the cases for the most recent quarter will be added to the last 3 quarters for a rolling one year period. The minimum number of applicable cases from the baseline will be maintained during each of these reporting periods. In the event that the minimum applicable cases are not achieved the state will add cases from the next month or quarter or utilize other approved method by CB.</p>											
Renegotiated Improvement Goal												
Status (Enter the quarter end date and measurement for the reported quarter in cell below)	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12
	03/31/11	06/30/11	09/30/11	12/31/11	03/31/12							
	NA	NA	NA	86.21	92.16							
Note												



Outcome/Systemic Factor: Safety Outcome 2												
Item: Performance Item 4 - Risk assessment and safety management												
Performance as Measured in Final Report	65.0%											
Performance as Measured at Baseline/Source Data Period	100.0% with 108 applicable cases (4/1/09 - 3/31/10)											
Negotiated Improvement Goal	Not applicable. No goal established - State will report performance through first 2 quarters of PIP and the need for further measurement will be jointly evaluated by WI and CB											
Method of Measuring Improvement	<p>Case review data</p> <p>Data Source: Quality Services Review (QSR) scoring data will be used to monitor performance related to the following practice indicators associated with the child, siblings, and family:</p> <ul style="list-style-type: none"> <li>-Exposure to Threats of Harm (QSR Child Status Indicator 1)</li> <li>-Behavioral Risk to Self/Others (QSR Child Status Indicator 7)</li> </ul> <p>Numerator: Number of cases where average score for above indicators is a 4 or above on a scale of 1-6.</p> <p>Denominator: Total number of cases reviewed</p> <p>Data: Data will be reported in PIP quarter 4, for which the cases from July 2010-December 2011 will be included in the measurement of performance for this item. For each subsequent PIP quarter, the cases for the most recent quarter will be added to the last 3 quarters for a rolling one year period. The minimum number of applicable cases from the baseline will be maintained during each of these reporting periods. In the event that the minimum applicable cases are not achieved the state will add cases from the next month or quarter or utilize other approved method by CB.</p>											
Renegotiated Improvement Goal												
Status (Enter the quarter end date and measurement for the reported quarter in cell below)	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12
	03/31/11	06/30/11	09/30/11	12/31/11	03/31/12							
	NA	NA	NA	95.24	95.37							
Note												



Outcome/Systemic Factor: Permanency Outcome 1 Item: Performance Item 7- Permanency goal for child												
Performance as Measured in Final Report	60.0%											
Performance as Measured at Baseline/Source Data Period	66.0% with 74 applicable cases (4/1/09 - 3/31/10)											
Negotiated Improvement Goal	73.0%											
Method of Measuring Improvement	<p>Case review data</p> <p>Data Source: Quality Services Review (QSR scoring data will be used to report performance related to the following practice indicator associated with the child and family (where applicable):</p> <p>-Permanency: Planning a Change Process (QSR Practice Review Indicator 6B)</p> <p>Numerator: Number of applicable cases where score for above indicator is a 4 or above on a scale of 1-6</p> <p>Denominator: Total number of applicable cases reviewed</p> <p>Data: Data will be reported in PIP quarter 4, for which the cases from July 2010-December 2011 will be included in the measurement of performance for this item. For each subsequent PIP quarter, the cases for the most recent quarter will be added to the last 3 quarters for a rolling one year period. The minimum number of applicable cases from the baseline will be maintained during each of these reporting periods. In the event that the minimum applicable cases are not achieved the state will add cases from the next month or quarter or utilize other approved method by CB.</p>											
Renegotiated Improvement Goal												
Status (Enter the quarter end date and measurement for the reported quarter in cell below)	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12
	03/31/11	06/30/11	09/30/11	12/31/11	03/31/12							
	NA	NA	NA	63.1	63.51							
Note												



Outcome/Systemic Factor: Permanency Outcome 1												
Item: Performance Item 10 - Other permanent planned living arrangement												
Performance as Measured in Final Report	53.0%											
Performance as Measured at Baseline/Source Data Period	41.0% with 17 applicable case (4/1/09 - 3/31/10)											
Negotiated Improvement Goal	56.3%											
Method of Measuring Improvement	<p>Case review data</p> <p>Data Source: Quality Services Review (QSR) scoring data will be used to report performance related to the following practice indicator associated with the child and family (where applicable):</p> <p>-Progress to Permanency: Older Youth (QSR progress Indicator 3)</p> <p>Numerator: Number of applicable cases where score for above indicators is a 4 or above on a scale of 1-6</p> <p>Denominator: Total number of applicable cases reviewed</p> <p>Data: Data will be reported in PIP quarter 4, for which the cases from July 2010-December 2011 will be included in the measurement of performance for this item. For each subsequent PIP quarter, the cases for the most recent quarter will be added to the last 3 quarters for a rolling one year period. The minimum number of applicable cases from the baseline will be maintained during each of these reporting periods. In the event that the minimum applicable cases are not achieved the state will add cases from the next month or quarter or utilize other approved method by CB.</p> <p><i>NOTE: Given the small sample size and resulting sizeable sampling error, the results of this approach will be evaluated with the Children's Bureau PMAG after the end of each of the first two quarters to evaluate the integrity of this methodology.</i></p>											
Renegotiated Improvement Goal												
Status (Enter the quarter end date and measurement for the reported quarter in cell below)	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12
	03/31/11	06/30/11	09/30/11	12/31/11	03/31/12							
	NA	NA	NA	56.67	34.62							
Note												



Outcome/Systemic Factor: Well-Being Outcome 1												
Item: Performance Item 17 - Needs and services of child, parents and foster parents												
Performance as Measured in Final Report	35.0%											
Performance as Measured at Baseline/Source Data Period	79.0% with 108 applicable cases (4/1/09 - 3/31/10)											
Negotiated Improvement Goal	84.0%											
Method of Measuring Improvement	<p>Case review data</p> <p>Data Source: Quality Services Review (QSR) scoring data will be used to report performance related to the following practice indicators associated with the child, siblings, and caregivers:</p> <ul style="list-style-type: none"> <li>-Overall Case Assessment and Planning (QSR Practice Review Indicator 4B)</li> <li>-Long Term View for Safety Case Closure (QSR Practice Review Indicator 5)</li> <li>-Planning for a Change Process: Permanency and Behavioral Outcomes (QSR Practice Review Indicator 6B and 6C)</li> <li>-Resource and Support Use (QSR Practice Review Indicator 7)</li> <li>-Tracking and Adjustment (QSR Practice Review Indicator 9)</li> </ul> <p>Numerator: Number of cases where average score for above indicators is a 4 or above on a scale of 1-6</p> <p>Denominator: Total number of cases reviewed</p> <p>Data: Data will be reported in PIP quarter 4, for which the cases from July 2010-December 2011 will be included in the measurement of performance for this item. For each subsequent PIP quarter, the cases for the most recent quarter will be added to the last 3 quarters for a rolling one year period. The minimum number of applicable cases from the baseline will be maintained during each of these reporting periods. In the event that the minimum applicable cases are not achieved the state will add cases from the next month or quarter or utilize other approved method by CB</p>											
Renegotiated Improvement Goal												
Status (Enter the quarter end date and measurement for the reported quarter in cell below)	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12
	03/31/11	06/30/11	09/30/11	12/31/11	03/31/12							
	NA	NA	NA	78.57	86.11							
Note												



Outcome/Systemic Factor: Well-Being Outcome 1												
Item: Performance Item 18 - Child and family involvement in case planning												
Performance as Measured in Final Report	44.0%											
Performance as Measured at Baseline/Source Data Period	82.0% with 108 applicable cases (4/1/09 - 3/31/10)											
Negotiated Improvement Goal	86.7%											
Method of Measuring Improvement	<p>Case review data</p> <p>Data Source: Quality Services Review (QSR) scoring data will be used to report performance related to the following practice indicators associated with the child, mother, father, and caregiver (if applicable):</p> <ul style="list-style-type: none"> <li>-Engagement of Child and Family (QSR Practice Review Indicator 1A)</li> <li>-Role and Voice in Decisions (QSR Practice Review Indicator 1B)</li> </ul> <p>Numerator: Number of cases where average score for above indicators is a 4 or above on a scale of 1-6</p> <p>Denominator: Total number of cases reviewed</p> <p>Data: Data will be reported in PIP quarter 4, for which the cases from July 2010-December 2011 will be included in the measurement of performance for this item. For each subsequent PIP quarter, the cases for the most recent quarter will be added to the last 3 quarters for a rolling one year period. The minimum number of applicable cases from the baseline will be maintained during each of these reporting periods. In the event that the minimum applicable cases are not achieved the state will add cases from the next month or quarter or utilize other approved method by CB.</p>											
Renegotiated Improvement Goal												
Status (Enter the quarter end date and measurement for the reported quarter in cell below)	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12
	03/31/11	06/30/11	09/30/11	12/31/11	03/31/12							
	NA	NA	NA	77.78	84.26							
Note												



Outcome/Systemic Factor: Well-being Outcome 1 Item: Performance Item 19 - Caseworker visits with child												
Performance as Measured in Final Report	71.0%											
Performance as Measured at Baseline/Source Data Period	94.0% with 103 applicable cases (4/1/09 - 3/31/10)											
Negotiated Improvement Goal	97.0%											
Method of Measuring Improvement	<p>Case review data</p> <p>Data Source: Quality Services Review (QSR) scoring data will be used to report performance related to the following practice indicator associated with the child and siblings:</p> <p>-Worker Visits with Child and Siblings (QSR Additional Review Findings 9)</p> <p>Numerator: Number of cases where average of the scores for above indicator is a 4 or above on a scale of 1-6</p> <p>Denominator: Total number of cases reviewed</p> <p>Data: Data will be reported in PIP quarter 4, for which the cases from July 2010-December 2011 will be included in the measurement of performance for this item. For each subsequent PIP quarter, the cases for the most recent quarter will be added to the last 3 quarters for a rolling one year period. The minimum number of applicable cases from the baseline will be maintained during each of these reporting periods. In the event that the minimum applicable cases are not achieved the state will add cases from the next month or quarter or utilize other approved method by CB.</p>											
Renegotiated Improvement Goal												
Status (Enter the quarter end date and measurement for the reported quarter in cell below)	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12
	03/31/11	06/30/11	09/30/11	12/31/11	03/31/12							
	NA	NA	NA	92.06	96.3							
Note												



Outcome/Systemic Factor: Well-being Outcome 1 Item: Performance Item 20 - Caseworker visits with parents												
Performance as Measured in Final Report	34.0%											
Performance as Measured at Baseline/Source Data Period	73.0% with 107 applicable cases (4/1/09 - 3/31/10)											
Negotiated Improvement Goal	78.5%											
Method of Measuring Improvement	<p>Case review data</p> <p>Data Source: Quality Services Review (QSR) scoring data will be used to report performance related to the following practice indicator associated with the child and siblings:</p> <p>-Worker Visits with Mother and Father (QSR Additional Review Findings 9)</p> <p>Numerator: Number of cases where average of the scores for above indicator is a 4 or above on a scale of 1-6</p> <p>Denominator: Total number of cases reviewed</p> <p>Data: Data will be reported in PIP quarter 4, for which the cases from July 2010-December 2011 will be included in the measurement of performance for this item. For each subsequent PIP quarter, the cases for the most recent quarter will be added to the last 3 quarters for a rolling one year period. The minimum number of applicable cases from the baseline will be maintained during each of these reporting periods. In the event that the minimum applicable cases are not achieved the state will add cases from the next month or quarter or utilize other approved method by CB.</p>											
Renegotiated Improvement Goal												
Status (Enter the quarter end date and measurement for the reported quarter in cell below)	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12
	03/31/11	06/30/11	09/30/11	12/31/11	03/31/12							
	NA	NA	NA	72.03	83							
Note												